24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES

Schedule E)	FOR SE OF FORM 24/48
IAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
B-PAC	
	C C00567982
Check if 24-hour report 48-hour report New report Amends report filed	d on M M / D D / Y Y Y Y Y
Full Name of Payee	Date of Public Distribution/Dissemination
Greener and Hook	10 31 2014
Mailing Address 901 King Street	Amount
Suite 400	Amount
City State Zip Code	99375.00
Alexandria VA 22314	Transaction ID : SE.4272 Date of Disbursement or Obligation
Purpose of Expenditure Media Buy Category/ Type	10 30 / 2014
Name of Federal Candidate Support Office	e Sought: House District:
JONI K ERNST Oppose	President State: IA
Calendar Year-To-Date Per Election for Office Sought Disb 2014	ursement For: Primary
Full Name of Payee	Date of Public Distribution/Dissemination
	M M / D D / Y Y Y Y
Mailing Address	Amount
	Amount
City State Zip Code	
	Date of Disbursement or Obligation
Purpose of Expenditure Category/ Type	M = M / D = D / Y = Y = Y
Name of Federal Candidate Support Office	ee Sought: House District:
Oppose	President Senate State:
Galeriaar Tour to Bate	oursement For: Primary General
Per Election for Office Sought	Other (specify) -
(a) SUBTOTAL of Itemized Independent Expenditures	99375.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	99375.00
Under penalty of perjury I certify that the independent expenditures reported herein were not me with, or at the request or suggestion of, any candidate or authorized committee or agent of either party committee) any political party committee or its agent.	
	10 31 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Signature	